

Supportive Services for Veteran Families (SSVF)

Homelessness Prevention

Eligibility Screening Disposition Form

SCREENING DATE (e.g., 05/24/2010)

/				/							
Month				Day				Year			

APPLICANT HEAD OF HOUSEHOLD

First Name	Last Name

STAGE 1: VA ELIGIBILITY

Eligibility Condition 1. Veteran Status

Eligible? <input type="checkbox"/> YES <input type="checkbox"/> NO	VA Eligibility Requirements <input type="checkbox"/> Served in the active military, naval, air service, and was discharged or released therefrom under conditions other than dishonorable.
---	--

Eligibility Condition 2. Very Low Income Status

Eligible? <input type="checkbox"/> YES <input type="checkbox"/> NO	VA Eligibility Requirement: <input type="checkbox"/> Gross annual household income less than 50% Area Median Income for household size (grantee may set lower income threshold) Household size (all adults/children): <input style="width: 50px;" type="text"/> 50% of Area Median Income for Household Size: \$ <input style="width: 50px;" type="text"/> <input style="width: 50px;" type="text"/> Total Annual Gross Income from All Sources: \$ <input style="width: 50px;" type="text"/> <input style="width: 50px;" type="text"/>
---	--

Eligibility Condition 3. Imminently At-Risk of Literal Homelessness

Eligible? <input type="checkbox"/> YES <input type="checkbox"/> NO	VA Eligibility Requirements: <input type="checkbox"/> Imminent loss of current primary nighttime residence (housing an individual or family owns, rents, or lives in with or without paying rent; housing shared with others; and rooms in hotels or motels paid for by the individual or family); AND <input type="checkbox"/> No other residence; AND <input type="checkbox"/> No resources or support networks, e.g., family, friends, faith-based or other social networks, immediately available to prevent them from becoming literally homeless; AND
---	---

	<input type="checkbox"/> At least one of the following: <input type="checkbox"/> Has moved because of economic reasons two or more times during the 60 days immediately preceding the application for homelessness prevention assistance; <input type="checkbox"/> Is living in the home of another because of economic hardship; <input type="checkbox"/> Has been notified in writing that their right to occupy their current housing or living situation will be terminated within 21 days after the date of application for assistance; <input type="checkbox"/> Lives in a hotel or motel and the cost of the hotel or motel stay is not paid by charitable organizations or by Federal, State, or local government programs for low-income individuals; <input type="checkbox"/> Is exiting a publicly funded institution, or system of care (such as a health-care facility, a mental health facility, or correctional institution) without a stable housing plan; OR <input type="checkbox"/> Otherwise lives in housing that has characteristics associated with instability and an increased risk of homelessness, as identified in the SSVF grantee's VA approved Grantee Screening Criteria and Targeting Threshold Plan. VA approved housing situation(s):
	<input type="text"/>
	<input type="text"/>
	<input type="text"/>

Other Program Eligibility Conditions	
Additional Grantee Eligibility Requirements (as identified in SSVF grantee's VA approved <i>Grantee Screening Criteria and Targeting Threshold Plan</i>)	
Eligible? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> Not Applicable	<input type="text"/>
	<input type="text"/>
	<input type="text"/>
	<input type="text"/>

Stage 1 Disposition	
<input type="text"/>	Eligible: <u>Meets ALL Eligibility Requirements Above-Complete Stage 2</u>
<input type="text"/>	Not Eligible: <u>Does Not Meet One or More Eligibility Requirements Above</u>

STAGE 2: TARGETING

'x' all that apply	Targeting Criteria	Point Value
<input type="checkbox"/>	Has moved because of economic factors two or more times in the past 60 days	3
<input type="checkbox"/>	Living in a hotel or motel not paid for by charitable organizations or by Federal, State, or local government programs	3
<input type="checkbox"/>	Living with friends or family, on a temporary basis	3
<input type="checkbox"/>	Being discharged from an institution and reintegrating into the community without a stable housing plan	3
<input type="checkbox"/>	History of homelessness as an adult, prior to any homeless episode occurring in the past 60 days	3
<input type="checkbox"/>	Households annual gross income is less than 30% of local Area Median Income for household size	3
<input type="checkbox"/>	Housing loss within 14 days	3
<input type="checkbox"/>	At least one dependent child under age 6	3
<input type="checkbox"/>	At least one dependent child age 6 – 17	2
<input type="checkbox"/>	Veteran returning from Iraq or Afghanistan	2
<input type="checkbox"/>	Applied for shelter or spent at least one night during the prior 60 days literally homeless (shelter, place not meant for human habitation, transitional housing for homeless persons)	2
<input type="checkbox"/>	Sudden and significant loss of income, including employment and/or cash benefits	2
<input type="checkbox"/>	Housing loss within 21 days	2
<input type="checkbox"/>	Rental and/or utility arrears	1
Total Points (Sum of VA targeting criteria checked above. Total points must be added manually)		<input type="text"/>

'x' all that apply	Additional Targeting Criteria Established by Grantee (as identified in SSVF grantee's VA approved <i>Grantee Screening Criteria and Targeting Threshold Plan</i>)	Point Value
<input type="checkbox"/>		
<input type="checkbox"/>		
<input type="checkbox"/>		
<input type="checkbox"/>		
Total Points (Sum of additional VA approved grantee targeting criteria points checked above. Total points must be added manually.)		

Total Targeting Points (Sum of VA/Grantee points above. Total points must be added manually.)	
---	--

Stage 2 Disposition	
<input type="checkbox"/>	Meets Targeting Threshold VA Approved Targeting Threshold Score: <input type="text"/>
<input type="checkbox"/>	Does Not Meet Targeting Threshold

SSVF STAFF COMPLETING SCREENING FORM:

<input type="text"/>	<input type="text"/>
First Name (Print)	Last Name (Print)
<input type="text"/>	
Signature	